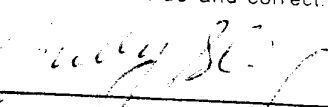


AO 440 (Rev. 8/01) Summons in a Civil Action

RETURN OF SERVICE		
Service of the Summons and Complaint was made by me ¹		DATE December 21, 2007
Name of SERVER Judy Shing		TITLE Legal Assistant
Check one box below to indicate appropriate method of service		
<div style="display: flex; flex-direction: column; gap: 10px;"> <div> <input type="checkbox"/> Served Personally upon the Defendant. Place where served: </div> <div> <input type="checkbox"/> Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein. Name of person with whom the summons and complaint were left: </div> <div> <input type="checkbox"/> Returned unexecuted: </div> <div> <input checked="" type="checkbox"/> Other (specify): On December 21, 2007, summons was served by US Certified Mail to: US Attorney's Office Civil Process Clerk 450 Golden Gate Avenue, 11th Floor San Francisco, CA 94102 </div> </div>		
STATEMENT OF SERVICE FEES		
TRAVEL	SERVICES	TOTAL
DECLARATION OF SERVER		
<p>I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.</p> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 40%;"> <p>Executed on <u>1/7/2008</u></p> <p style="text-align: center; margin-top: 5px;">Date</p> </div> <div style="width: 50%; text-align: right;"> <p></p> <p>Signature of Server</p> <p>Address of Server</p> </div> </div> <div style="text-align: right; margin-top: 10px;"> <p>LAW OFFICE OF TRICIA WANG 39159 PASEO PADRE PARKWAY SUITE #205 FREMONT, CA 94538</p> </div>		

(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>US Attorney's Office 450 Golden Gate Ave. 11th Floor S. F. CA 94102</p>		<p>B. Received by (Printed Name) E. DAW</p>	<p>C. Date of Delivery 12/26/07</p>
		<p>D. Is delivery address different from item 1? If YES, enter delivery address below:</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number (Transfer from service label)</p>		<p>7006 0100 0003 0444 6735</p>	

PS Form 3811, February 2004

Domestic Return Receipt

192595-02-M-1540

UNITED STATES POSTAL SERVICE

Favideh Yamini

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

LAW OFFICE OF TRICIA WANG
39159 PASEO PADRE PARKWAY
SUITE #205
FREMONT, CA 94538

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AO 440 (Rev. 8/01) Summons in a Civil Action

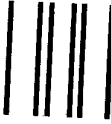
RETURN OF SERVICE		
Service of the Summons and Complaint was made by me ¹		DATE December 21, 2007
Name of SERVER <div style="text-align: center; font-size: 1.2em;">Judy Shing</div>		TITLE Legal Assistant
Check one box below to indicate appropriate method of service		
<div style="display: flex; flex-direction: column; gap: 10px;"> <div> <input type="checkbox"/> Served Personally upon the Defendant. Place where served: </div> <div> <input type="checkbox"/> Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein. Name of person with whom the summons and complaint were left: </div> <div> <input type="checkbox"/> Returned unexecuted: </div> <div> <input checked="" type="checkbox"/> Other (specify): <div style="margin-left: 40px;"> On December 21, 2007, summons was served by U.S. Certified Mail to: Michael Mukasey Attorney General of the US Department of Justice 950 Pennsylvania Avenue NW Washington DC 20530-0001 </div> </div> </div>		
STATEMENT OF SERVICE FEES		
TRAVEL	SERVICES	TOTAL
DECLARATION OF SERVER		
<p>I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.</p> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 40%;"> <p>Executed on <u>1/7/2008</u></p> <p style="text-align: center; font-size: 0.8em;">Date</p> </div> <div style="width: 50%; text-align: right;"> <p><u>Judy Shing</u></p> <p style="font-size: 0.8em;">Signature of Server</p> <p style="margin-top: 10px;">Address of Server</p> </div> </div> <div style="text-align: right; margin-top: 10px;"> <p>LAW OFFICE OF TRICIA WANG 39159 PASEO PADRE PARKWAY SUITE #205 FREMONT, CA 94538</p> </div>		

(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input checked="" type="checkbox"/> <i>Samuel J. P. [Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p><i>Michael Mukasey Attorney General of the US DoJ Justice 950 Pennsylvania Ave Washington DC 20530</i></p>		<p>B. Received by (Printed Name) <i>DEC 26 2007</i></p> <p>C. Date of Delivery</p>	
<p>2. Article Number (Transfer from service label)</p> <p><i>7006 0100 0003 0444 6698</i></p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

UNITED STATES POSTAL SERVICE

Farideh Yamini



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

**LAW OFFICE OF TRICIA WANG
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SUITE #205
FREMONT, CA 94538**

